AMENDMENT TRANSMISSION CORPORATIONS (LARGE BUSINESSES) DOCKET NO. MPEE 2 12375-1-1

AF

In re application of: Kost, et al.

Seria No.

Filed MN 0.2 705

For: SNOWPLOW MOUNT

COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

		Cla	ims as Filed or Ame	nded		
(1)	(2) Claims Filed or Remaining After Amendment	(3)	(4) Highest No. Previously Paid For	(5) Present Extra	(6) Rate	(7) Total Amount
Total Claims	- 45	Minus	** 45	0	\$ 0	\$ 0.00
Indep. Claims	* 2	Minus	***	0	\$0	\$ 0.00
		<u>-</u>	Total Additional I			\$ 0.00

•	If the entry is	Column 2 is less than the entry in Column 4 write "0" in C	Column 5
---	-----------------	--	----------

<u>x</u>	General Authorization to Charge Deposit Account For All Required Fees, Fees Under 37 C.F.R. 1.17, or All Required Extension of Time Fees. Should any additional fees be required in connection with this
	pplication, during the entire pendency of the application, the Commissioner is authorized to charge my fees which may be required, or credit any overpayment to Account No. 6-0308. This
	ransmission form is submitted in triplicate.

A check in the amount of \$_____ to cover the required Fee is enclosed.

i hereby certify that this correspondence is being depositive the United States Postal Service as first class mail an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

abline machalo

FAY, SHARPE, FAGAN, MINNICH & MCKEE

ROBERT V. WICKERS

Reg. No. 19,504

1100 Superior Avenue, Seventh Floor

Cleveland, Ohio 44114-2579

Phone: (216) 861-5582 Fax: (216) 241-1666

^{**} If the "Highest No. Previously Paid For" is less than 20 write "20".

If the "Highest No. Previously Paid For" is less than 3 write "3".